voved OMB No. 2050–0039 (Expires 9-30-96) int or type. Form designed for use on elite (12-pite	ch) typewriter.	ructions on back of page		Department of Toxic Substances Con Sacramento, California
UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address  1 5 0 5 NAMAND E AV  1 CODE C 5 7  4. Generator's Phone (10) 5 3 3 7 7	477N: 7 TV	B. State	Manifest Document  Generator's ID	95426467
5. Transporter 1 Company Name	6. US EPA ID Numb		Transporter's ID	
SAFETY-KLEEN CORP.	1 140 9949	D. Trans	porter's Phone	1// O 0 100 669-5740
7. Transporter 2 Company Name	8. US EPA ID Numbe	er E. State	Transporter's ID	
			porter's Phone	
9. Designated Facility Name and Site Address	10. US EPA ID Number	er G. State	Facility's ID	976
2120 SOUTH YALE ST SANTA ANA. CA	92704 CAT 0006	13976 H. Facili	y's Phone	14 241-7047
11. US DOT Description (including Proper Shipp	ing Name, Hazard Class, and ID Number	12. Containers No. Type	13. Total Quantity	14. Unit Waste Number
WASTE COMPOUNDS. (MONGETHANGLAMINE)S (DOOG.DOOS.DOIS.DO	NA1760 PGIIIKERG	#60) DM		G State 7.1 EPA/Other DOGG
b. RG WASTE COMBUST (PETROLEUM NAPHTHA) (DOO6, DOOB, DO18, DO3	IBLE LIGUID, N. C. S NA1993 PGIII (DOO	i) DM		State 741  EPA/Other DOO1
C.				State EPA/Other
d.			* .	State EPA/Other
J. Additional Descriptions for Materials Listed Al	DOGS, DOGS, DOGS, DO	a. 14 c.	ng Codes for Waste AND 01	s Listed Above b. 1.4 AND 0.1 d.
	SKDOT# A:	566 B: 583	C.	<b>3</b> :
<ol> <li>GENERATOR'S CERTIFICATION: I hereby packed, marked, and labeled, and are in all</li> </ol>	declare that the contents of this consignment respects in proper condition for transport	t are fully and accurately described by highway according to applicable	above by proper shi international and na	ipping name and are classified, trional government regulations.
If I am a large quantity generator, I certify economically practicable and that I have sel threat to human health and the environment waste management method that is available	ected the practicable method of treatment ; OR, if I am a small quantity generator,	. storade, or disposal currently ava	ileble to me which r	ninimizes the present and future
Printed/Typed Name	Signature		MARKETON SALVERS CONTRACTOR CONTR	Month Day Year
17. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name	Of 1841 Signature	and Milas	havinisminismi Marinisminismi	Month Day Year
<ol> <li>Transporter 2 Acknowledgement of Receipt or Printed/Typed Name</li> </ol>	Signature Signature			Month Day Year
19. Discrepancy Indication Space	Control and Contro		y y y	
20. Facility Owner or Operator Certification of re Printed/Typed Name	eceipt of hazardous materials covered by t	his manifest except as noted in Item	19.	Month Day Year
EOWANDO		to be the state of	- water water	monin Day rear

DO NOT WRITE BELOW THIS LINE.

TSDF SEMDS THIS COPY TO GENERATOR WITHIN 30 DAYS.
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

int or type. Form designed for use on elite (12-pitch) typewriter.  1. Generator's US EPA ID No.	Aanifest Documen	t No	2. Page 1	Sacramento, Californ
WASTE MANIFEST	38736		of	is not required by Federal law
3. Generator's Name and Mailing Address		A. State	Manifest Document	Number
MAIL COUL CA-59 TO ATIN R TVELL TORRANCE CA-59		B. State	Generator's ID	
4. Generator's Phone ( )		1	446749	399911111
5. Transporter 1 Company Name 6. US EPA ID Number		C. State	Transporter's ID	.71136
SAFETY-KLEEN CORP.   LLD, 98490824		D. Trons	porter's Phone	300 669-5740
7. Transporter 2. Company, Name 8. US EPA ID Number		E. State	Transporter's ID	and the second s
			porter's Phone	
Designated Facility Name and Site Address     10. US EPA ID Number		G. State	Facility's ID	3976 1 1 1 1 1 1
2120 SOUTH YALE ST SANTA ANA, CA 92704 CAT 0006139	76	H. Facili	ty's Phone	
	12. Con	rainare	13. Total	14, Unit
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	No.	Type	Quantity	Wt/Vol I. Waste Number
" WASTE COMPOUNDS, CLEANING LIGUID		DM		G State
(MONDETHANDLAMINE) 8 NA1760 PGIII (ERG#60 (D006, D008, D018, D021, D027, D035, D039D040	\$ [~\c\()		00006	EPA/Other
b. RO MASTE COMBUSTIBLE LIGUID-NED S-	englis megani pantalagan jawa pentenganan pente	estanting.		State 741
(PETROLEUM NAPHTHA) NA1993 PGIII(DOO1) (DOO6, DOOS, DO18, DO35, DO35, DO40) (ERG#27)	/ 80a.Joseph	DH	and mil	EPA/Other
c.		S		State
				EPA/Other
<b>d.</b>				State
				EPA/Other
J. Additional Descriptions for Materials Listed Above	0008	K. Hand	ling Cades for Was	b.
[(D) DO 14 DO 18 (B) MODEL DODE: DODE: DATE:				
		С.		d.
15. Special Handling Instructions and Additional Information	/ 3/8/9/3/8			
SKOOT# 4: 5	56 B:	58	5. C:	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fu				
packed, marked, and labeled, and are in all respects in proper condition for transport by high	1-1-1-1-1	-L1		
If I am a large quantity generator, I certify that I have a program in place to reduce the vectorially practicable and that I have selected the practicable method of treatment, storage	volume and toxici je, or disposal cu	ty of wa: rrently av	ste generated to the ailable to me which	e degree I have determined to a minimizes the present and futo
threat to human health and the environment; OR, if I am a small quantity generator, I have waste management method that is available to me and that I can afford.	made a good fo	ith effort	to minimize my wa	ste generation and select the b
Printed/Typed Name Signature	ernanna erdan er Saldania erania. Saldania erania	U	in an arrange of the state of t	Month Day
17. Transporter 1 Acknowledgement of Receipt of Materials				
Printed/Typed Name Signature	100	g and	Same and the same of the same	Month Day
18. Transporter 2 Acknowledgement of Receipt of Materials	<u> 41                                   </u>	ari Europii	~1	
Printed/Typed Name Signature				Month Day
19. Discrepancy Indication Space				
	ja j	- maketa K		
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this man	ifest except as no	ted in Ite	m 19.	
Printed/Typed Name Signature	The second secon	ght in the second second	A Commence of the Commence of	Month Day
FOUDAND PULL SUBJECTION		and the second second second second second	consission and the second	100000

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